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NOTES FROM THE MEDICAL PRESS



IN CHARGE OF

ELISABETH ROBINSON SCOVIL

THE DIAGNOSIS OF GASTRIC ULCER.—At a meeting of the Medical Association of the Greater City of New York, Dr. Max Einhorn said that in the diagnosis of ulcer of the stomach he had for some time past been using the method of introducing a white string and allowing it to remain in the stomach over night. If an ulcer was present and in such a position that the string came in contact with its surface there would be found more or less discoloration from blood at a certain part of the string. More recently he had employed a rubber bag, inclosed in gauze. This was introduced into the stomach in a flaccid condition, and then dilated by means of the tube to which it was attached. It was allowed to remain *in situ* for half an hour, when the air was permitted to escape from it and it was withdrawn. The gauze was dried, and it showed discoloration if it had come in contact with an ulcer. Several of the gauze bags which had been employed in this way were exhibited. In one instance the bloody discoloration was caused by a cancer, with an ulcerating surface.

GASTRIC DIGESTION OF INFANTS.—The *New York Medical Journal*, quoting from the *American Journal of the Medical Sciences*, says: Clarke states that the motility of the infant stomach varies inversely to the concentration of the food. The more dilute the food the more frequently may the feedings be given. Lime water does not reduce the acidity of the gastric contents, the neutralizing of a portion of the acid being overcome by an increased stimulation of hydrochloric acid by the gastric glands. This may even increase the amount of acid available for digestion. Sodium citrate acts on the acid in the stomach, converting it into sodium chloride, and thus markedly reduces the “available hydrochloric acid.” Barley water seems to have no constant effect upon the chemistry of gastric digestion in the infant. The type of infants who vomit persistently may be divided into two classes, defective and excessive acidity. Test feedings should be given to this type of infants to determine to which class they belong. A 5 per cent. milk-sugar solution seems to be the most satisfactory feeding to determine fine differences in the gastric

contents. This may be followed by a mixture of milk, one part, water, two parts, to determine to what extent the gastric glands are capable of responding to stimuli. For the lactose solution thirty minutes is the most satisfactory time to allow the feeding to remain in the stomach; for the milk mixture sixty minutes. On purely theoretical grounds it would appear that when the acidity is low either small doses of alkalies or of hydrochloric acid are indicated, while in excessive acidity sodium citrate holds out the best hope of benefit. Protein digestion in the infant's stomach is slight and is proportional to the amount of hydrochloric acid in the organ.

PELLAGRA.—The *New York Medical Journal* says: A movement has been started by the physicians of Meridian, Miss., to bring before the medical profession of the state the fact that pellagra prevails in Mississippi and seems to be increasing. They believe that many cases of the disease are being treated as eczema or other skin diseases, and it is their purpose to discover all such cases and collect as many facts relating to the disease as possible. If investigation proves the correctness of the theory that pellagra is due to eating mouldy or musty corn, an effort will be made to get the state legislature to pass a law requiring the inspection of all grain brought into the state. The United States Marine-Hospital Service has already taken up the matter and has sent out a good deal of information about pellagra. There has also been an outbreak of the disease in the State Insane Asylum of Illinois, at Peoria, and, on the request of the health authorities of the state of Illinois, Captain Joseph H. Siler, of the Medical Corps of the U. S. Army, has been ordered to visit the asylum for purposes of consultation and observation.

PRIVATE HYGIENE.—Private hygiene means a revolution in our habits of living. It means fresh air perpetually flowing through our houses and more of our lives spent out doors. It means common-sense in diet—the avoidance of bolting food, from which dyspepsia springs, and the re-education of normal food instincts, the avoidance of gluttony on the one side, and body starvation on the other, the avoidance of alcohol, the most potent of the predisposing causes of tuberculosis, and the avoidance of dirty, infected milk and meat. It means the “simple life,” free from over-exertion on the one hand; and indolence on the other; the habit of normal sleep, and the emancipation from worry.

In giving this prescription, Dr. Trudeau once said to me: “It is as simple as bathing in the waters of Jordan, and that is why people

are so slow to follow it."—From Professor Irving Fisher's "The War Upon the Great White Plague" in the *September Century*.

THE WAY OF THE REFORMER.—Every new truth which affects life must pass through a period in which it is hated before it attains the period in which it is loved. What people dread is change; what they wish is to be let alone. They will kill the reformer, if they can, and only those reformers who refuse to be killed, but who for years together go on savagely, patiently, tenderly reiterating the same message, in the end have their way, and are believed.—From Rev. Elwood Worcester's "The Emmanuel Movement" in the *July Century*.

METHOD FOR CUTTING AWAY PLASTER-OF-PARIS DRESSINGS.—The *New York Medical Journal* quotes this from a German contemporary: Neumann places beneath the plaster bandage a steel wire that extends a little distance beyond the dressing at each end. When it is desired to remove the dressing one end of the wire is seized with a suitable instrument and made to cut its way out.

CURRENT LITERATURE OF INTEREST TO NURSES

New York Medical Journal, September 4, "A Brief Consideration of the Contagious Theory of Tuberculosis," John Black White, M.D.; September 11, "The Administration of Anæsthetics"; September 25, "Prevention and Cure," Beverly Robinson, M.D. *Medical Record*, September 4, "The Convulsions of Whooping-cough," Editorial; September 11, "The Medical Management of Degenerate Children," Robert H. Porter, M.D.; September 18, "Anæsthesia in the Control of Inflammation," John H. Wainwright, M.D.; September 25, "Simpson and Chloroform," Victor Robinson. *Maryland Medical Journal*, September, "The True Function of the Tuberculosis Nurse," Mary E. Lent. *Journal of the American Medical Association*, September 18, "The Relation between the Science and Art of Infant Feeding," Henry Dwight Chapin, M.D.; "Tuberculosis Exhibit Cabinet," Frank B. Wynn, M.D.; September 25, "A New Type of Phthisiophobia," Adolphus Knopf, M.D.; October 2, "An Improvised Anæsthesia Cone," C. T. A. Hottendorf, M.D.; "The Prevention of Contagion"; October 9, "Diet in Typhoid Fever," Warren Coleman, M.D.; "Prevention of Malaria," Seale Harris, M.D.; "Massage in General Medicine," John K. Mitchell, M.D.; "Care of the Mouth," "Cold in the Head." *McClure's Magazine*, July, "Beer and the City Liquor Problem," George Kibbe Turner; "The Fly, the Disease of the House," E. T. Brewster; August, "The Story of an Alcohol Slave."